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Reply:

M.A. Aftab

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REPLY:

I agree with Ortega et al that the term “stroke” is vague and more precise terms such as infarct or ischemia should be used in radiology reporting. Unfortunately, the term stroke is a ubiquitous part of the general (nonradiologic) medical lexicon and national guidelines, particularly given the new emphasis on timely stroke therapy. In this context, what is being referred to is ischemic stroke.

What used to be classified as hemorrhagic stroke is now best classified as simply “intracranial hemorrhage,” which, as was pointed out in the original editorial, carries a different set of etiologies, symptoms, and therapies than ischemic stroke.

To ease the confusion on this terminology, it is being suggested that the term stroke be reserved for what used to be called

ischemic stroke, supplanting the ancient definition of the term stroke.

Finally, examples of hypoxia causing ischemia would include etiologies of hypoxic-ischemic injury such as carbon monoxide poisoning. In these cases, vascular perfusion may be preserved but the perfusing blood may lack adequate oxygen, resulting in ischemia. Perhaps a comma may have helped, “Ischemic events are caused by hypoperfusion of a region of the brain secondary to vascular occlusion, or hypoxia.”

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